New England Deaconess Hospital

pulse

185 Pilgrim Road, Boston, Massachusetts

July-August 1985

Patient Transport emphasizes friendly, helpful service

"We want to improve further our people's sense of their responsibilities and the patients' needs"
— Gary Rundle, training coordinator

"When I meet patients, I think that someday I might be in their situation. So I treat them the way I'd like to be treated," says Henry Allen, patient transporter. Although Allen has worked with the NEDH Patient Transport service for only six months, his spirit is typical of the people in his department who work to maintain a friendly atmosphere while moving as many as 200 patients a day.

Patient transporters are constantly on the move. They take patients from their rooms for tests such as CT scans and electrocardiograms, to doctors' offices in the Lowry Building, and occasionally to other institutions in the Longwood Medical Area. Steve Savilonis, dispatcher, says, "I usually get requests to transport patients the day before, and I try to schedule the pickups so patients will be on time for their appointments. Sometimes we take patients to Dana-Farber, to the Brigham, and to Beth Israel for a few special treatments that aren't available at the Deaconess."

In addition, someone from the department visits the patient floors hourly to pick up test specimens for delivery to the laboratories, to bring charts and x-rays, or to drop off flowers and patient mail.

Recently the department made some changes designed to improve its visibility and the quality of its service. Its name was changed from Messenger Service to Patient Transport to better describe the department's function. New uniforms and nametags ensure that transporters will be readily recognized when they arrive on a floor to pick up a patient.

Specialized training for the transporters is another addition. A recent session in body mechanics, sponsored by Physical Therapy, showed transporters how to lift patients safely and demonstrated techniques for pushing wheelchairs and stretchers without causing back strain. Infection control precautions also have been addressed.

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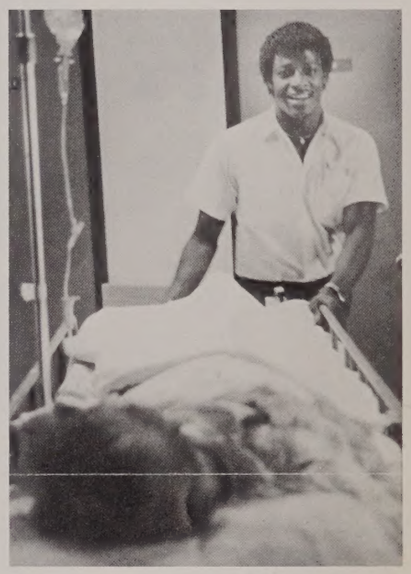

Henry Allen is one of the 21 NEDH patient transporters.

Coleman to head Joint Center for Radiation Therapy

C. Norman Coleman, M.D.

C. Norman Coleman, M.D., has been appointed director of the Joint Center for Radiation Therapy (JCRT) and chairman of the Radiation Therapy Departments at the Deaconess and other JCRT member hospitals. Coleman, who had a joint appointment as associate professor in the radiology and medicine departments at Stanford University School of Medicine, also has been named to the Alvan T. and Viola D. Fuller American Cancer Society Professorship of Radiation Therapy at Harvard Medical School.

"I'm very fortunate to have been given this opportunity," Coleman says. "Sam Hellman [Samuel Hellman, M.D., founder and former director of JCRT] clearly set up one of the most outstanding departments in the country, and I think many other institutions will ultimately follow the Joint Center's concept."

The largest radiation therapy center in New England, the JCRT is a cooperative program of the Deaconess, Beth Israel Hospital, Brigham and Women's Hospital, Children's Hospital, and the Dana-Farber Cancer Institute. Organized in 1968 under the auspices of Harvard Medical School, the JCRT maintains a central organization and common treatment philosophy throughout its member institutions.

Coleman plans to continue the JCRT's emphasis on multidisciplinary cancer treatment — combining radiation with surgery and chemotherapy to provide the best possible treatment for the individual patient. A particular interest of his is the basic biology of cancer cells and how it can be applied to cancer treatment. For example, certain drugs can make cancer cells more sensitive to radiation and make therapy more effective. "We're going to build a strong cancer biology division," he says, "with the goal of doing good basic research that can be applied to clinical treatment."

Coleman also hopes to expand existing JCRT programs such as intraoperative radiotherapy, interstitial therapy (implanting small radiation sources in a patient's body), computer-controlled radiotherapy, and hyperthermia (the use of heat to destroy cancer cells). "We will be adding more people with expertise in these fields to

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Sixty-four graduate from School of Nursing

"The NEDH pin is a singular badge of honor. Wear it proudly; it is envied by many," said John L. Rowbotham, M.D., president of the medical staff, to the members of the NEDH School of Nursing class of 1985. Rowbotham was chosen by the graduating class to deliver greetings from the medical staff at commencement exercises, held on the evening of May 9.

"Take time to help others, to be involved, and to extend yourselves"
— Barbara B. Hooker, R.N., M.S.

SON graduates Alicia Zajac (left) and Maura Murray after the baccalaureate and pinning ceremony.

Barbara B. Hooker, R.N., M.S., associate director of the school, gave the address to the graduating class, encouraging them to use their time well and noting four important areas of concern that would confront them in the coming years: education, ethics, the environment, and politics. "If you don't become involved in professional, personal, and political activities, you lose the right to criticize them," she said. "Take time to understand the issues. Take time to help others, to be involved, and to extend yourselves."

In the address from the graduating class, yearbook coeditor Joanne MacInnis said, "We have been surprised by our strengths; we have had to confront aspects of ourselves that are not so easily faced. Wherever we go, we go as people who have changed and grown."

This year's commencement ceremonies particularly honored Ellen D. Howland, R.N., who is retiring this summer after 29 years as director of Nursing. Laurens MacLure, hospital president, said, "Our school today is a product of her vision and her dedication to nursing education."

After receiving from the students a gift of roses and a $250 donation to the Idabelle and James Howland Scholarship Fund, established in memory of her parents, Howland said, "To stand here and look out over a sight such as this is a privilege few people have had. I want to thank all those who've made it possible."

Joanne MacInnis, who spoke on behalf of her class at the graduation ceremony, receives her pin from Ellen D. Howland, R.N., director of Nursing.

Howland and John I. Carlson Jr., vice chairman of the Board of Trustees, presented diplomas to the 64 students. The graduates had received their pins at the baccalaureate and pinning ceremony earlier in the day.

President of the Friends of the Deaconess Jane Tilley gave the school a check in the amount of tuition for one student for the entire three-year program, saying, "This is not only a gift of money, but a gift of love from the Friends." The Alumnae Association Scholarship, given each year to a graduate pursuing further study in nursing, was presented to Paula Richardson by Martha Ponce, president of the association.

Patient Transport

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Gary Rundle, training coordinator for the department, says, "We're working with the hospital's Training Department on a videotape that will address some of the 'do's and don'ts' of dealing with patients in a humorous but effective way. We want to improve further our people's sense of their responsibilities and the patients' needs."

That sensitivity to the patients' needs is shown in the many ways transporters help make a hospital stay a little more pleasant. Transporter Mary Weigand says, "I always make sure the patients know where I'm taking them and what procedure they're going to have."

"When you take a patient in a stretcher or a wheelchair onto an elevator," says Henry Allen, "you back them in. That way they aren't facing a wall and can see other people getting on the elevator."

"Talking to patients can relieve some of the anxiety they feel," says Gordon McKissock. "Just being nice to them means a lot."

Working closely with the nursing staff helps patient transporters do their job smoothly. They always check in and out at the nursing station, so the nurses are aware of when patients are leaving or returning to the floor. Sometimes transporters need a nurse's assistance when patients have special needs that may complicate moving them.

Ken McKenna, patient transport supervisor, says, "We're always glad to get comments and suggestions from the nursing staff or anyone else. If there is a problem or an unusual situation, we need to know about it. We've also gotten some very helpful suggestions from the floors."

By working to improve its service, Patient Transport also is gaining recognition for the role it plays in patient care. Rundle says, "Although transporters don't have the specialized knowledge and skills of some health care professionals, they make an important contribution to making our patients' stay with us as safe and pleasant as possible."

Coleman

(continued from page 1)

our staff," he says. "We want to maintain ourselves as an important resource for the entire Harvard medical community."

A graduate of the University of Vermont and the Yale University Medical School, Coleman served his medical internship and residency at University of California Hospitals in San Francisco. He was a clinical associate at the National Cancer Institute and a fellow in Radiation Therapy at Stanford Unversity School of Medicine. He is a fellow of the American College of Physicians and a member of many professional and scientific organizations.

Patent received for vascular graft method

NEDH has been granted a patent for a new synthetic vascular graft and a method of using the device to bypass a blocked blood vessel, developed by vascular surgeon Peter Madras, M.D. The patented system is designed to avoid graft blockage, which commonly occurs in synthetic grafts made to small-diameter blood vessels.

"It has been very easy to fabricate grafts for large vessels like the aorta," says Madras, "but bypasses to smaller blood vessels – those with a diameter of four millimeters or less – have usually failed because blockages would develop in the graft or in the adjoining blood vessel."

The only way to bypass small-diameter blood vessels successfully has been to use the patient's own vein as graft material. But there are times when this is not possible because of the patient's disease or previous surgery.

Madras says, "We needed to answer the question, 'Why can you use almost anything to bypass a large vessel, while the most sophisticated materials fail with small vessels?' The thinking was that the materials used for the bypass were at fault and that the cause of the blockage was unknown."

Madras's research indicated that the problem was not caused by the materials used to construct the graft but was the result of improper fit between the graft and the blood vessel. "It is easier to graft to large blood vessels because they are tougher and stronger," he says. "Small vessels are more delicate and are easily damaged. When stress is placed on a blood vessel, there are two natural responses: the blood vessel wall will enlarge – as any muscle will in response to tension – and a blood clot will form around the stressed area to prevent bleeding."

The standard surgical practice has been to use a graft considerably larger than the small blood vessel, in order to leave a large opening that would not become clogged. But Madras found that this method probably caused the blockages to develop, by putting excessive stress on the small blood vessel.

The new method devised by Madras will connect the graft to the artery without stressing the arterial wall. The patented process has several components, including the use of a variety of connectors and segments to accommodate the difference between a large and small blood vessel. Particularly important is the Teflon connector joining the graft to the smaller vessel, which is designed to reduce stress to the vessel wall at the point of connection. Also described is a method for measuring the diameter of blood vessels to within one-third of a millimeter, producing the closest possible fit between the vessel and the graft components.

"The concept that mechanical stress to the blood vessel may be the cause of blockages in a large percentage of grafts to small-diameter vessels has been demonstrated in published animal studies," says Madras. "We have an informal agreement with a leading vascular graft manufacturer to develop the necessary devices. Now that the patent has been granted, I hope we will soon be able to prepare for additional studies and eventually for clinical trials."

Intern's music has celestial premiere

"Sinfonia Elettronica," a composition by David Hoffman, M.D., an intern in the NEDH Department of Medicine, received its first public performance aboard the space shuttle Discovery. Hoffman composed the piece at the request of his brother Jeffrey Hoffman, Ph.D., an astrophysicist and member of the shuttle crew.

"When my brother was assigned to a shuttle team, he asked me to write a piece to premiere in outer space," Hoffman says. "It would have to be on tape, of course, and I decided on an electronic work that I could perform on a synthesizer."

Hoffman composed the piece at the MacDowell artists colony in New Hampshire, during a leave of absence from medical school, and recorded it during the "spare moments" of his internship. "The numerous delays and postponements of the shuttle mission helped no one but me," he says. "They gave me time to finish it."

The 16-minute composition was played for the shuttle crew and for the Mission Control team monitoring shuttle transmissions on the morning of April 15. "It's interesting to realize that the piece finished thousands of miles from where it began," Hoffman says.

Hoffman had received both bachelor's and master's degrees in music before entering medical school. "While I was working on my master's degree in music composition and theory, I realized that a career teaching music was not for me. I originally had been in pre-med with an interest in psychiatry, and decided to return to medicine," he says.

During the past year, Hoffman was one of four NEDH interns in a special psychiatry program. In July he began a residency at Massachusetts Mental Health Center. His next musical project will be to orchestrate "Sinfonia Elettronica" and plan for an earthly premiere in New York during the 1986-87 season.

NEDH intern David Hoffman, M.D., with the musical equipment he used to record "Sinfonia Elettronica."

NEDH in the news

Deaconess personnel in the news during the past several months include:

- Joseph L. Andrews, M.D., pulmonary disease specialist, is host of "Medicine Today," a monthly medical news program on radio station WEEI-AM.
- Patricia Conway, R.N., transplant clinician, was a guest on WBZ-TV's "People Are Talking," where she discussed organ transplantation and donation.
- Roger Jenkins, M.D., director of the liver transplant unit, participated in WBZ-TV's "Eyewitness News Conference" on organ donation and transplantation on June 3. Jenkins was also featured in a segment on organ transplantation on WBZ's "Evening Magazine."
- C. Burns Roehrig, M.D., internist, was interviewed regarding ethical issues involved in caring for the terminally ill for the "CBS Evening News."

Three honored for 25th anniversaries

Among employees honored on April 26 for their service to the Deaconess were three who observed their 25th service anniversaries.

Madelyn Celander, R.N., retired in May as coordinator of the operating room. She worked at the Deaconess over a period of 40 years, although her actual years of service totaled 25. A graduate of the NEDH School of Nursing, she says, "The advances in technology in recent years have made a great deal of difference to the Surgical Services Department. Although the number of cases we handle has not changed much, cases are more complicated, and much more expertise is required of our nurses."

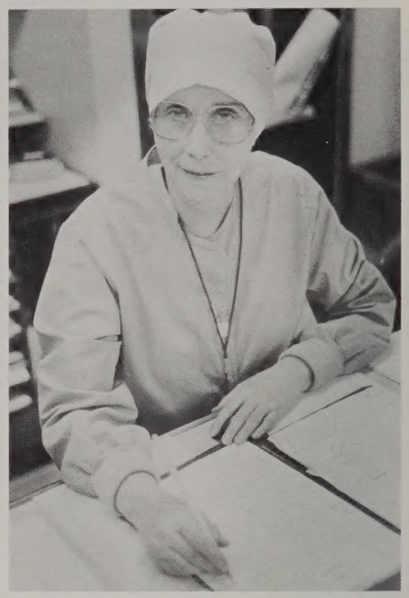
Celander says, "The operating rooms at the Deaconess have always been excellent. I've certainly enjoyed all my years here; we have great people and I will miss all of them."

David Colleran has spent 15 of his 25 years in the hospital mail room. He began with the Messenger Service (now Patient Transport). He is one of five mail room employees who sort mail and deliver it throughout the hospital complex. Colleran enjoys the fact that his job takes him all over. "I like getting around and seeing people," he says. "This is a nice place to work and the people I work with are fine."

Colleran says that he's seen a lot of changes at the hospital. "The place is a lot bigger than it used to be. When I came, there were only six floors in the Farr Building, and Meissner Lab and the School of Nursing weren't even built yet. Now we have many more places to cover."

Thomas Cullen is a technician in the animal facility of the Cancer Research Institute. He began 25 years ago as a general laboratory assistant to the late Shields Warren, M.D. He is responsible for the care and feeding of the mice, rats, and other animals used in essential scientific studies conducted at the CRI. Cullen also teaches new research assistants how to handle the animals. "Some of them don't know the safe and easy ways to pick up the animals, and some are afraid at first," he says.

"I like to be out doing things, not sitting in an office," Cullen says. "We all help each other here. It doesn't cost you a dime to be nice to people, and if you keep a good sense of humor, it's easy to get along with people."



Madelyn Celander, R.N., was coordinator of the operating rooms when she retired in May.

Near right: David Colleran delivers mail throughout the hospital complex.

Far right: Thomas Cullen takes care of the laboratory animals in the Cancer Research Institute.

Phonathon raises more than $10,000

Thirteen volunteers — hospital corporators, trustees, and members of management — called more than 400 potential donors during the first NEDH fund-raising phonathon on April 29. Their efforts resulted in pledges and contributions of $10,925 to the hospital's annual appeal campaign.

Willoughby Walling, director of External Resources, says, "This was an experiment to see whether people would respond better to a personal phone call than to a direct mail appeal, which is what we have used in the past."

During the two-hour phonathon, calls were placed to 402 people — potential donors or those who had given in the past but had not contributed to the 1985 appeal. Eighty-four people — 21 percent of those called — made pledges totaling $8,215.

"Some people who didn't pledge during the phonathon said they might make a contribution, and some of those we called weren't home," says Walling. "We followed up with letters to those people and have received additional contributions from them of $2,710."

Walling says the success of the phonathon means it will probably be repeated next year, possibly on a larger scale. "We're particularly pleased that we received 44 pledges from people who had never given to the Deaconess before. Of course the help of our volunteers was essential, and I'd particularly like to thank corporator James Loveday and his employer, Goldman, Sachs & Company, for the use of their office space and telephones."

Medicare DRGs may change hospital reimbursement system

This fall, the system by which Massachusetts hospitals are paid for their services may be changed radically. In all probability, Medicare — the federal government's medical insurance program for people over 65 — will make payments to hospitals in the state according to Diagnosis Related Groups (DRGs) into which all Medicare patients will be classified.

Since October of 1982, the state's cost containment law — Chapter 372 — has required that all third-party payers reimburse hospitals at the same rate. Third-party payers are organizations such as Blue Cross/Blue Shield, Medicare, Medicaid, and private insurance companies that pay hospitals, physicians, and other organizations for health care services.

Chapter 372 is a prospective payment system — one by which payments for services are determined before the services are rendered — rather than a retrospective system, in which hospitals are reimbursed for the actual cost of their services. The law sets limits on the total amount a hospital can be reimbursed annually by third-party payers, based on the hospital's costs during a set base year (the 1981 fiscal year).

Chapter 372 required a waiver from the federal government that exempted the state from the Medicare Prospective Payment System (PPS). PPS assigns each patient to one of 468 DRGs, based on the particular illness or surgical procedure. Each DRG has a fixed rate of payment, no matter what the actual cost of treating an individual patient.

This fall, Chapter 372 is up for renewal, and the waiver exempting Massachusetts from the DRG system must also be renewed if the existing system is to continue. At this time there is considerable uncertainty as to whether the state will request or be granted the waiver.

Although the final decision will be up to the Governor, members of the coalition that produced Chapter 372 — which includes representatives of the hospital and business communities, Blue Cross, and private insurance carriers — do not agree on whether the waiver should be requested. Because the federal government has indicated that waiver renewal would depend on some strict conditions, and because some hospitals believe they would do better under DRGs than under Chapter 372, the Massachusetts Hospital Association has voted against seeking the Medicare waiver.

No matter what the final decision, any waiver application must be made by July 1.

Despite the uncertainty, the Deaconess is preparing for the probable introduction of DRGs. A DRG committee was set up last fall by Richard Lee, hospital director; and Elizabeth Wood, manager of Quality Assurance, was named project manager for DRG implementation.

"If the Medicare PPS is implemented, the Deaconess will face a very different reimbursement environment," Wood says. "Although Chapter 372 also is a prospective system, its rates are based on a particular hospital's costs. Under DRGs, hospitals are paid on the basis of the particular types of illnesses they treat and procedures they perform, rather than the actual costs of patient care."

Currently the committee is looking at the implications of DRGs for NEDH and what actions the hospital should take in response to a new system. Also being investigated are systems to improve the hospital's cost accounting — analyzing the actual costs of providing particular services — and programs to reduce resource consumption.

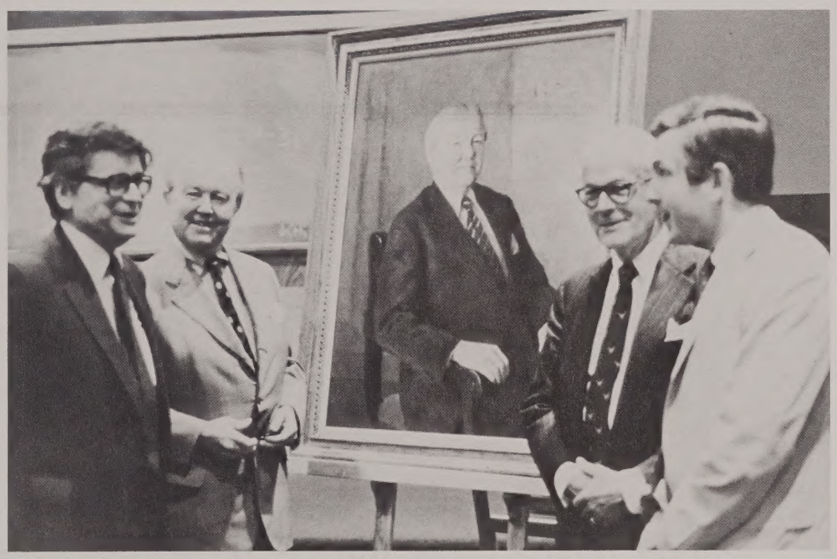
Paul Earle, associate director, says, "It does look like we will be out of Chapter 372 this fall, although the details are not decided yet. We may end up with a two-level system — DRGs for Medicare and something similar to Chapter 372 for other third-party payers — or all reimbursement may be based on DRGs.

"We are projecting that DRGs will cause a significant reduction in Medicare payments to the Deaconess, basically because our high-intensity services usually result in costs that are higher than average DRG rates," Earle says.

No matter what system is decided upon, the state will have to pass a new law. Any legislation addressing hospital reimbursement will have to consider many issues. How will hospitals be compensated for bad debts and caring for poor, uninsured patients? How will the costs involved in teaching programs be paid? PULSE will report on further developments and how they will affect the hospital in future issues.

Moving? We'd like to know

Because the post office does not forward third-class mail, we need your help in keeping the PULSE list accurate. If you are moving, please inform the NEDH Public Relations Department, 185 Pilgrim Road, Boston, Massachusetts 02215, (617) 732-8046. It would be helpful if you could send your PULSE address label. NEDH employees should inform their supervisors of changes of address.



A portrait of retired chairman of the Department of Surgery William V. McDermott, M.D., was unveiled in Joslin Auditorium on June 13. Left to right are George Augusta, the artist; McDermott; George W.B. Starkey, M.D., chairman of the portrait committee; and Glenn W. Steele, M.D., current chairman of the Department of Surgery.

Public Health Council approves DoN for ICU beds

At a meeting held on June 11, the Massachusetts Public Health Council (PHC) approved the Deaconess' Determination of Need (DoN) application to convert nine medical/surgical beds into intensive care beds. Paul Babcock, NEDH assistant director, says, "We've been experiencing a shortage of intensive care beds for some time, and installed the stepdown units to try to fill the need while controlling costs. But it quickly became evident that we would require added intensive care capabilities."

The medical/surgical unit on Baker 5 will be converted into a seven-bed intensive care unit. Renovations are expected to begin later this summer, and should be completed in six to eight months.

Associate Director David Lilley heads a committee that will determine the best way to phase in the new unit. Lilley says, "While the unit is being built, the committee will look at the current demand for ICU beds for various services — medicine, general surgery, cardiothoracic surgery, and the like. We think then we'll have a better sense of staffing needs."

If the demand for intensive care beds continues to rise, the last two of the nine beds approved by the PHC will be installed in the existing units on Farr 6.

news in brief

Alison Arkin, M.S., R.D., clinical dietetian, spoke on diabetes nutrition education to the Massachusetts Dietetic Association convention.

Barbara Albers, M.S.W., social worker, spoke on the psychosocial aspects of outpatient chemotherapy to a conference sponsored by the South Shore Visiting Nurse Association and HNS Healthdyne Co.

J. Davis Allan Jr., M.D., infectious disease, has joined the Department of Medicine.

Rosemary Ananis, M.S.W., social worker, spoke on the psychosocial aspects of cancer at a clinical skills course at Dana-Farber Cancer Institute.

Joseph L. Andrews Jr., M.D., pulmonary, published an article, "The Midnight Wheezer," in *Modern Medicine.* Andrews and **Karoly Balogh, M.D.,** coauthored a paper on lung cancer in women which appeared in *Cancer.*

Richard Baptista, M.S., R.Ph., director of Deaconess Home Health Care Corp., spoke on home health care at the Dana-Farber Home Health Care Fair and to the annual meeting of the Massachusetts Assoc. of Community Health Agencies. He also spoke on home hyperalimentation at the Day Kimball Hospital in Putnam, Connecticut, and had articles published in *Infusion* and *American Journal of Hospital Pharmacy.*

Arthur L. Boland Jr., M.D., orthopedic surgeon, has joined the Department of Surgery.

Paola DeGirolami, M.D., director of microbiology, and **Judy Kimber, M.T. (A.S.C.P.),** technologist, presented a seminar on intestinal protozoan infections at the national meeting of the American Society of Clinical Pathologists.

Walter Dzik, M.D., medical director of the Blood Bank, spoke on transfusion reactions at the annual seminar of the Massachusetts Association of Blood Banks. Other Blood Bank staff members participating in the meeting were **Susan Arendacs, M.T. (A.S.C.P.); Joyce Blank, M.T. (A.S.C.P.) S.B.B.; Dolores Fici, M.T. (A.S.C.P.) S.B.B.; Faith Kaplan, M.S., M.T. (A.S.C.P.) S.B.B.; Sheila Maillet, M.T. (A.S.C.P.); Linda Mondor, M.T. (A.S.C.P.);** and resident **Jeffrey Medeiros, M.D.**

F. Henry Ellis, M.D., chief of thoracic and cardiovascular surgery, received the Distinguished Alumnus Award from the Mayo Foundation. Ellis also gave the 14th Annual Thomas Buford Lecture at Washington University Medical Center in St. Louis on management of carcinoma of the esophagus and cardia.

Judith Farias, R.N., assistant director, School of Nursing, was elected member-at-large of the board of review, council of diploma programs, National League for Nursing.

Janis Gallagher, R.N., coordinator, intravenous therapy, led a discussion on blood transfusion reactions at the National Intravenous Therapy Convention. Also making presentations at the convention were **Beverly Green, R.N.,** head nurse, I.V. therapy; and **Mary Anne Killackey, R.N.,** staff nurse, I.V. therapy.

Benjamin Gerson, M.D., director of clinical chemistry, spoke on pharmacokinetics and free drug monitoring to the review in clinical chemistry sponsored by the American Society of Clinical Pathologists.

Steven Goldring, M.D., chief of rheumatology, was corecipient of the Carol-Nachman Prize for research for his paper on connective tissue destruction in inflammatory joint diseases.

Pamela Hartzband, M.D., endocrinologist, gave medical grand rounds on corticosteroids and hypothalamic-pituitary-adrenal axis suppression at UCLA Center for Health Sciences.

Edward Mascioli, M.D., nutrition/metabolism, gave a paper on medium chain triglycerides and structured lipids in hyperalimentation to the annual meeting of the American Oil Chemists Society.

Susan McGreevey, senior public relations assistant, received a Publicity Club of Boston merit award in the newspaper category for PULSE.

Robert C. Moellering, M.D., chairman of the Department of Medicine, has been named editor-in-chief of the journal *Antimicrobial Agents and Chemotherapy.* Moellering, **Bruce Bistrian, M.D.,** internist, and **James Tullis, M.D.,** hematologist, made presentations at the annual meeting of the American College of Physicians.

Richard Nesto, M.D., cardiologist, presented a paper on nifedipine added to beta-blocker therapy in stable angina to the Sixth ADALAT Symposium in Geneva, Switzerland.

Elizabeth Rodriguez, R.N., staff nurse, operating room, was elected to the board of directors of Massachusetts Chapter I of the Association of Operating Room Nurses.

Dorothy Ross, director of Marketing, spoke on organizational synergy in changing times to the New England chapter of the National I.V. Therapy Nurses Association.

Albert L. Sheffer, M.D., chief of allergy/immunology, spoke on allergic aspects of pharmaceutical excepients to the quinquennial meeting of the United States Pharmacopeial Convention.

Alison Sneider, director of Public Relations, has been elected president of the 200-member Boston Chapter of the Public Relations Society of America.

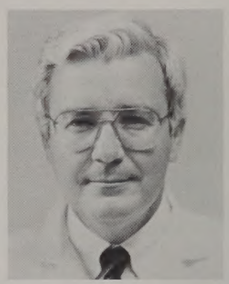
Donna Walsh, M.S., M.T. (A.S.C.P.), chemistry supervisor, spoke on clinical chemistry instrumentation to the American Society of Clinical Pathologists spring workshops.

Michael M. Wick, M.D., Ph.D., dermatologist, spoke on the relevance of pigment cell biology to melanoma at the International Conference on Skin Melanoma.

Julie A. White, R.N., M.P.H., nurse epidemiologist, was a course manager for a program on management skills for infection control nurses at the Centers for Disease Control. White also wrote an article on the cause of AIDS for *Massachusetts Nurse.*

John Zrebiec, M.S.W., social worker, spoke on coping with the emotional aspects of diabetes to the Worcester Chapter of the American Diabetes Association.

J. Davis Allan Jr., M.D.



Arthur L. Boland Jr., M.D.

School of Nursing graduation

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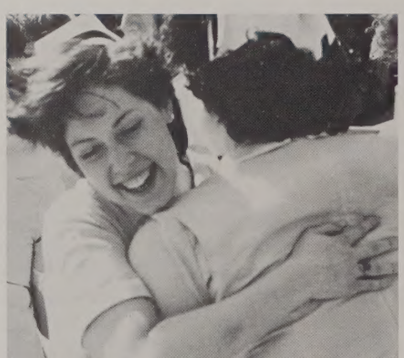

SON graduate Patty McDonough hugs a classmate after the baccalaureate and pinning ceremony.

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